PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/532109

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
U.S. NATIONAL STAGE FEES				,			1	RATE	FEE	1	RATE	FEE
ва	SIC FEE	· · · · · · · · · · · · · · · · · · ·	SMALL ENT. = \$ 150		LARG	GE ENT. = \$ 300	1	BASIC FEE		OR	BASIC FEE	300
EX	MINATION F	EE	Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100			her situations = 100 / \$ 200		EXAM. FEE		1	EXAM. FEE	200
SEARCH FEE			U.S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400			her situations = 250 / \$ 500		SEARCH FEE		1	SEARCH FEE	400
FEE	FOR EXTRA	SPEC. PGS.	minus 100 =			/ 50 =		X \$ 125 =			X \$ 250 =	
τοτ	TAL CHARGEA	BLE CLAIMS	19 mi	nus 20 =	•			X \$ 25 =		OR	X \$ 50 =	·
סאו	EPENDENT C	LAIMS	3 "	ninus 3 =				X \$ 100 =	-	OR	X \$ 200 =	
MU	TIPLE DEPEN	IDENT CLAIM PR	ESENT					+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2						•	TOTAL		OR	TOTAL	·	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMALL E	NTITY	OR	OTHER SMALL E		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FEE	-	OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	nn 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
**	f the "Highest Nu	imn 1 is less than the imber Previously Pai imber Previously Pai	For IN THIS SP	ACE is less	than '20	, enter "20".	<u> </u>	FEE .		OR -	TOTAL ADDIT. FEE	
		nber Previously Paid					in the	appropriate box	in column 1.			